# ARBETSINTYG / TILLFÄLLIGT ARBETSINTYG

|  |  |
| --- | --- |
| Arbetstagarens namn |  |
| Arbetstagarens person-  beteckning (eller födelsetid) |  |

|  |  |
| --- | --- |
| Arbetsgivarens namn |  |
| Arbetsplatsens adress |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Tidpunkt för anställning | ☐  Startdatum: | | ☐  Anställningen fortgår |
| Slutdatum: | |
| Typ av anställning | ☐ | ☐ | |
|  | Heltid | Deltid, | |
|  |  | ange omfattning: | |
|  |  | % av heltidsarbete eller | |
|  |  | timmar per månad | |
| Titel, befattning |  | | |
| Arbetsuppgifter: |  | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |

|  |  |
| --- | --- |
| Tid och plats |  |
| Arbetsgivarens  representant, underskrift |  |
| Namnförtydligande och  telefonnummer |  |

# WORK CERTIFICATE / TEMPORARY WORK CERTIFICATE

|  |  |
| --- | --- |
| Employee Name |  |
| Employee DOB (or Finnish social security number): |  |

|  |  |
| --- | --- |
| Employer Name |  |
| Workplace Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Employment Time | ☐  Start date: | | ☐  Employment continues |
| End date: | |
| Employment Type | ☐ | ☐ | |
|  | Full-time | Part-time, | |
|  |  | specify scope: | |
|  |  | % of full-time employment or | |
|  |  | hours per month | |
| Title, Position |  | | |
| Work Tasks: |  | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |

|  |  |
| --- | --- |
| Time and Place |  |
| Employer Representative, Signature |  |
| NAME IN BLOCK LETTERS  and phone number/ e-mail address |  |